

**Certificate of Notice Page 1 of 2**  
 United States Bankruptcy Court  
 District of Puerto Rico

In re:  
 ORLANDO RODRIGUEZ DIAZ  
 Debtor

Case No. 16-00901-ESL  
 Chapter 13

**CERTIFICATE OF NOTICE**

District/off: 0104-3

User: mendeza  
 Form ID: pdf001

Page 1 of 1  
 Total Noticed: 14

Date Rcvd: Feb 09, 2016

Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Feb 11, 2016.

db	+ORLANDO RODRIGUEZ DIAZ,	12 CAMINO LOS SERRANOS,	SAN JUAN, PR 00926-9012
smg	DEPARTAMENTO DE HACIENDA,	PO BOX 9024140,	OFICINA 424-B, SAN JUAN, PR 00902-4140
smg	FEDERAL LITIGATION DEPT. OF JUSTICE,	PO BOX 9020192,	SAN JUAN, PR 00902-0192
smg	PR DEPARTMENT OF LABOR,	PRUDENCIO RIVERA MARTINEZ BLDG,	505 MUNOZ RIVERA AVENUE, 12 FLOOR,
	SAN JUAN, PR 00918		
4246335	AEELA,	PO Box 364508,	San Juan, PR 00936-4508
4246339	Money Express,	Bankruptcy Division,	PO Box 9146, San Juan, PR 00908-0146
4246340	Scotiabank de Puerto Rico,	PO Box 362230,	San Juan, PR 00936-2230
4246341	Scotiabank de Puerto Rico,	PO Box 363368,	San Juan, PR 00936-3368
4246342	Sears/Cbna,	133200 Smith Rd,	Cleveland, OH 44130
4246343	Sistema de Retiro ELA,	PO Box 42003,	San Juan, PR 00940-2203

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.

smg	E-mail/Text: ustpregion21.hr.ecf@usdoj.gov	Feb 09 2016 19:16:08	US TRUSTEE,
	EDIFICIO OCHOA,	500 TANCA STREET SUITE 301,	SAN JUAN, PR 00901-1922
4246336	E-mail/Text: marilyn.gonzalez@popular.com	Feb 09 2016 19:17:11	Banco Popular de Puerto Rico,
	Mortgage Servicing Department,	PO Box 362708,	San Juan, PR 00936-2708
4246337	E-mail/Text: kpp@bspr.com	Feb 09 2016 19:16:57	Banco Santander Puerto Rico,
	San Juan, PR 00936-2589		PO Box 362589,
4246338	E-mail/Text: laura.velez@firstbankpr.com	Feb 09 2016 19:15:20	Firstbank Puerto Rico,
	PO Box 9146,	San Juan, PR 00908-0146	

TOTAL: 4

\*\*\*\*\* BYPASSED RECIPIENTS \*\*\*\*\*

NONE.

TOTAL: 0

Addresses marked '+' were corrected by inserting the ZIP or replacing an incorrect ZIP.  
 USPS regulations require that automation-compatible mail display the correct ZIP.

**I, Joseph Speetjens, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.**

**Meeting of Creditor Notices only (Official Form 9): Pursuant to Fed. R. Bank. P. 2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.**

Date: Feb 11, 2016

Signature: /s/Joseph Speetjens

**CM/ECF NOTICE OF ELECTRONIC FILING**

The following persons/entities were sent notice through the court's CM/ECF electronic mail (Email) system on February 8, 2016 at the address(es) listed below:

MONSITA	LECAROZ ARRIBAS	ustpregion21.hr.ecf@usdoj.gov
ROBERTO	FIGUEROA CARRASQUILLO	on behalf of Debtor ORLANDO RODRIGUEZ DIAZ
		cmecf@rfclawpr.com,
		cmecf.rfclawpr@gmail.com

TOTAL: 2

United States Bankruptcy Court  
District of Puerto Rico, San Juan Division

IN RE:

Case No. \_\_\_\_\_

RODRIGUEZ DIAZ, ORLANDO

Chapter **13**

Debtor(s)

## CHAPTER 13 PAYMENT PLAN

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee ☒ directly ☐ by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.

PLAN DATED: <b>2/08/2016</b> <input type="checkbox"/> AMENDED PLAN DATED: _____ <input checked="" type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION Filed by: <input type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other	
<b>I. PAYMENT PLAN SCHEDULE</b>  \$ <b>175.00</b> x <b>57</b> = \$ <b>9,975.00</b> \$ <b>240.00</b> x <b>3</b> = \$ <b>720.00</b> \$ _____ x _____ = \$ _____ \$ _____ x _____ = \$ _____ \$ _____ x _____ = \$ _____  <div style="text-align: right;">TOTAL: \$ <b>10,695.00</b></div>  Additional Payments: \$ _____ to be paid as a LUMP SUM within _____ with proceeds to come from:  <input type="checkbox"/> Sale of Property identified as follows: _____ _____  <input type="checkbox"/> Other: _____ _____  Periodic Payments to be made other than, and in addition to the above: \$ _____ x _____ = \$ _____  <div style="text-align: right;">PROPOSED BASE: \$ <b>10,695.00</b></div>	<b>II. DISBURSEMENT SCHEDULE</b>  A. ADEQUATE PROTECTION PAYMENTS OR _____ \$ _____ B. SECURED CLAIMS: <input type="checkbox"/> Debtor represents no secured claims. <input checked="" type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows: 1. <input type="checkbox"/> Trustee pays secured ARREARS: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. <input type="checkbox"/> Trustee pays IN FULL Secured Claims: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 3. <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 4. <input checked="" type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder: <b>AEELA</b> 5. <input type="checkbox"/> Other: _____ 6. <input checked="" type="checkbox"/> Debtor otherwise maintains regular payments directly to: <b>Banco Popular de P R Sistema de Retiro El</b> C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2) D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims. 1. (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: _____ <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: _____ Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. Unsecured Claims otherwise receive PRO-RATA disbursements.  <b>OTHER PROVISIONS: (Executory contracts; payment of interest to unsecureds, etc.)</b> <b>Tax refunds will be devoted each year, as periodic payments, to the plan's funding until plan completion. The plan shall be deemed modified by such amount, without the need of further Court order. The debtor(s) shall seek court's authorization prior any use of funds.</b>
<b>III. ATTORNEY'S FEES</b> (Treated as § 507 Priorities)  Outstanding balance as per Rule 2016(b) Fee Disclosure Statement: \$ <b>2,868.00</b>	
Signed: <b>/s/ ORLANDO RODRIGUEZ DIAZ</b> Debtor  _____ Joint Debtor	

Attorney for Debtor **RFigueroa Carrasquillo Law Office PSC**Phone: **(787) 744-7699**